STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

ENTERED

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

np (Received)

00

دب £..... 2013

Date: Permit #: Amount Paid: などの 2 TO CO.

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zor

Refund:

Secretarial Stati	, 2	TA SE	nec a lot toought a	DANA EN SOLO	Municipal Use				Commercial Use				▼ Residential Use				Proposed Use	 Existing Structure: (if permit being applied for is relevant to it)  Proposed Construction:	<b>3</b>	-1-201			\$ 5.005   1.005	T.		of Completion  * include donated time & material	Value at Time	☐ Non-Shoreland	A Silvielation	Constant The second second		Section /		1/4,	PROJECT LOCATION	Kon La (	Authorized Agent: (Persor Signing Application on behalf of Owner(s))	ten Lat	73723 6	₩.	Richard	TYPE OF PERMIT REQUESTED—
			T			×			Jse				se				- \$	(if permit being	J Keylare deck	Pkoperty	Run a Business on	Relocate (existing bldg)	Conversion	X Addition/Alteration	☐ New Construction	Project (What are you applying for)			🕱 Is Property/	Creek or Landward side of Floodplain?	☐ Is Property/	, Township		1/4	Legal Description:	<i>0</i> -7	son Signing Applica	ex Can	KOPH.	ingger makka	Frice	QUESTED—►
Otner: (explain)	Conditiona	Special Use: (explain)		Accessory	Accessory Building	Addition/Alteration	Mobile Ho	Bunkhouse		***************************************					Residence	Principal St		g applied for	deck	· 	- 1	sting bldg)	2000	teration	uction				Land within :	ward side of	Land within	N,	ن ا	1/ +5, to1 1,409			tìon on behalf o	anstru c	0	T	KSON	SATU AND USE
lain)	Conditional Use: (explain)	: (explain)		Building Additio	l	Iteration (specify)	Mobile Home (manufactured date)	w/ (□ sanitary, g	with Attached Garage	with (2 <sup>nd</sup> ) Deck	with a Deck	with (2 <sup>nd</sup> ) Porch	with a Porch	with Loft	Residence (i.e. cabin, hunting shack, etc.)	ructure (first st		s relevant to it)	1	- 1			- 1	-	X 1-Story	# of Stories and/or basement			X Is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue	Floodplain?	300 feet of River, S	N, Range _ Ø _ W	×	ot Lot(s)	(Use Tax Statement) 04	7).		tion 7		1 Q		□ SAN
rner: (explain)	100000000000000000000000000000000000000	A THE TRANSPORT OF THE		Accessory Building Addition/Alteration (specify)	Ι. Ι	to replace	date)	<b>Bunkhouse</b> w/ ( $\square$ sanitary, or $\square$ sleeping quarters, or $\square$ cooking & food prep facilities)	Garage	was recovered with famous from the fact that	a consession and a cons				ng shack, etc.)	Principal Structure (first structure on property)	Proposed Structure	Length:			-	***************************************	+	X.	☐ Seasonal	rt Use			Pond or Flowage  If yescontinue →	If yescontinue	☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent)	Nama	Town of:	CSM Vol & Page	234-2	115-492-0034	Agent Phone:	715-634-8609	1793 ROS	City/State/Zip:	875 E. Harr.	☐ SANITARY ☐ PRIVY ☐ C
					7 X X	deck		s, or 🗀 cooking 8								_	ure	1000			□ None	- 1			_ _	# of bedrooms			Distance Stru		Distance Structure	Kagon	10000	Lot(s) No.	-15-2-05	104Ward	Agent Mailing Ad	rumber:	a (1) =	3	<i>'</i> 25,	ONDITIO
					shape	a a		k food prep facilit					The state of the s					Width:	□ None	☐ Compost Toilet	☐ Portable (w/service contract)	□ Privy (Pit)	- 1	- 1	☐ Municipal/City	Ser I			Distance Structure is from Shoreline:		cture is from Shoreline:		*	. Block(s) No.	-011-10000	WF SY	<b>Agent Mailing Address</b> (include City/State/Zip): $\mathcal{D} \cap \mathcal{C} \cap \mathcal{C} \setminus \mathcal{D} \setminus \mathcal{C}$			ĺ	minneapol	<b>P</b>
					_			ies) (												Toilet	w/servic	or i	exists)		/City	Whai wer/Sa s on th			oreline : feet	feet	oreline :		Lot Size	Subd		Recorded Recorded	/State/Zi				109-22	ାଧ
						7											Dime				e contra	Vaulte	Specify 7	Specify Type:		What Type of Sewer/Sanitary System Is on the property?			P+	ř			že	Subdivision:	m //	ded Doc	9;				717 C	
>	<   ×	×		×	× .	10×10/01	×	×	×	×	×	×	×	×	×	×	imensions	Height:		debilante de	<u>a</u>	d (min 2)	Vpe:	ype:		of Ystem rty?			□ Yes	Floodplain Zone?	Is Property in				57	ument: fi	> S	-	0	<u>ۇ</u> ت	<u></u>	□ B.O.A.
-	-   -	_		_			_	_	_	_	-	-	_	_	-	<b>-</b>		7   7.		***************************************	-	Ited (min 200 gallon)	200						• v	Zone?	₹ ;;	9.6	Acreage		Page(s)_	Yes D	Written Au Attached	riditibet rijote.	hor D	7/2 - 79/	<u> </u>	- 16 €
						230		manazan Hidding of Hid		- Commission - Com							Square Footage						ا ( ت !	x Well	□ City	Water			¥ No	Present?	Are Wetlands	19	IQ		057 Page(s) 490	□ No perty Ownership)	Written Authorization Attached	ione.	hono.	612-791-3166		phone:

tion) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the Box 184 Hayward W:54843te \$ - T ـــــ نب

	Authorized Agent:
(If you are signing	49
g on behalf of the owner(s) a letter of authorization must accompany this application)	The second secon

must sign or letter(s) of authorization must

Owner(s): (If there a

Address to send permit

Attach

Copy of Tax Statement V

If you recently purchased the property send your Recorded Deed

Date

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Hold For Sanitary: Hold For TBA: Hold For Affidavit: Held For Fees: Hold For Fees: Held For TBA: Hold For Affidavit: Held For Fees: Held For Back Mot require some some than the mation. Less APPROVED.	ctor MICMAN JUTTHE	nmittee or Board Conditions Attached? In Yes In No -(If No they need to be attached.)  ALON OF ALCHA FOOTOWITE, Decks Must be Som  Shape  1	Structure (Downtines (Monconformally ) Kom UTW (N) Lakes Classification ( ) Date of Inspection: 11-2(-12) Inspected by: 11/4/4/1	S Proposed Building Site Delineated   愛Yes □ No   Was Property Surveyed ction Record:	Case #;  y Created   X Yes □ No	Affidavit Required Affidavit Attached	Permit Date: 11.35.13	Sanitary Number: # of bedrooms: Sanitary Date:	NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not beg For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dw The local Town, Village, City, State or Federal agencies may also require permits.	I (DF), Holding Tank (HT),	secually, the oblitually line from which the secuals must be incoding this the sectoack must be measured that the sectoack must be measured to the measurement by the from which the sectoack must be measurement by the form which the sectoack must be measurement by the form and form a known of the properties of the pro	Dack to Well	Lot Line ADD + Feet Elevation of Floodplain	from the South Lot Line HOS'4 Feet from the West Lot Line Sg.' Feet	Setback from the Centerline of Platted Road    m.le   Feet   Setback from the Lake (ordinary high-water mark)   Setback from the Established Right-of-Way   Feet   Setback from the River, Stream, Creek	Description Measurement Description Meas	changes in plans must be approved to the closest point)	Tool of	NO X	400+ Existing Existing	4,10,	replacement 10th 20' to	Slope over 20% to	رم م	Tank (HT) and/or (*) Pr
Same.	Date of Approval /-/3	siz	assification ( / ) Re-Inspection:	45 THE PROOF	. □ No	tequired □ Yes ØNo		Date:	ng Code.	, Privy (P), and Well (W).		1		Feet Feet	S& Feet Feet Feet	Measurement	by the Planning & Zoning Dept.			1			to lake		<b>W</b> (P)